

FILING RECEIPT
CORRECTED



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
ASSISTANT SECRETARY AND COMMISSIONER
OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/289,321	04/09/99	1642	\$968.00	10254/7007-1	20	30	5

~~ELIZABETH R PLUMER~~
~~WOLF GREENFIELD & SACKS PC~~
~~600 ATLANTIC AVENUE~~
~~BOSTON MA 02210~~

Ivor R. Elrifi
Mintz Levin
One Financial Center
Boston, MA 02111

Attorney Docket:
19644-010 (Tufts-10)

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice of Missing Parts of Application" ("Missing Parts Notice") in this application, please submit any corrections to this Filing Receipt with your reply to the "Missing Parts Notice." When the PTO processes the reply to the "Missing Parts Notice," the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) WILLIAM W. BACHOVCHIN, MELROSE, MA.

CONTINUING DATA AS CLAIMED BY APPLICANT-

THIS APPLN IS A CON OF 08/837,305 04/11/97 ^{Now} PAT 5,965,532
WHICH IS A CIP OF 08/671,756 06/28/96

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 05/26/99
TITLE

~~LOW CONCENTRATIONS OF KBP2-ADIPATE INHIBITS IL-2 PRODUCTION~~

PRELIMINARY CLASS: 514

Corrected Title: Multivalent Compounds for
Crosslinking Receptors and Uses Thereof

File Folder	4.7.00	Initials	
ECB			
Docket Entry			
Docket Cross	(3)		
Order Copies			
Annuities			
Confirmation			

12/14/99

RECEIVED

JAN 05 2000

MINTZ LEVIN, BOSTON
BOSTON DOCKET DEPT.

DATA ENTRY BY: BLACK, NICOLE

TEAM: 03 DATE: 12/01/99

(See reverse for new important information)

Express Mail Label No. EJ770267398US
Date of Deposit: November 3, 1999



Please type a plus sign (+) in this box



PTO/SB (12-97)

Approved for use through 9/30/00. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/289,321
	Filing Date	April 9, 1999
	First Named Inventor	Bachovchin
	Group Art Unit	1642
	Examiner Name	Not Assigned
	Attorney Docket Number	19644-010 (Tufts-10)

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After-Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/ Response	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Appeal Communication to Group (Brief, Reply Brief)
<input type="checkbox"/> Affidavit(s)/Declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> After Final	<input type="checkbox"/> Combined Declaration and Power of Attorney	<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Notice of Appeal	<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Form 1449 PTO	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Postcard	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Response to Missing Parts (Filing Date Granted)	<input type="checkbox"/> Request for Refund	

☒ Additional Enclosure(s) (please identify below):

Request for Corrected Filing Receipt

Copy of Filing Receipt with Corrections

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Submitted by	Ivor R. Elrifi	Registration No.	39,529
Signature			
Date	November 3, 1999		

TRADOCs:1259374.1(QZQM011.DOC)

EJ770267398US

Express Mail No. EJ770267598US
Date of Deposit: November 3, 1999

PATENT APPLICATION
Attorney Docket No.: 19644-010 (Tufts-10)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS : Bachovchin
ASSIGNEE : Tufts University
SERIAL NUMBER : 09/289,321
FILING DATE : April 9, 1999
FOR : Multivalent Compounds for Crosslinking Receptors and Uses Thereof

EXAMINER : To Be Assigned
ART UNIT : 1642



November 3, 1999
Boston, Massachusetts

Assistant Commissioner for Patents
Office of Initial Patent Examination
Customer Service Center
Washington, D.C. 20231

REQUEST FOR CORRECTED FILING RECEIPT

1. Applicants request a Corrected Filing Receipt for the above mentioned patent application. Applicants enclose a copy of the Filing Receipt with the corrections noted thereon. Issuance of a corrected filing receipt is respectfully requested.

2. There are errors with respect to the following data, which are:

☒ incorrectly entered

and/or

☐ omitted.

Error in

Correct data

1. ☐ Applicants' name
2. ☐ Applicants' address
3. ☒ Title
4. ☐ Filing Date
5. ☐ Serial Number
6. ☐ Foreign/PCT Application Re:
7. ☐ Continuing Data

- 1.
- 2.
3. Multivalent Compounds for Crosslinking Receptors and Uses Thereof
- 4.
- 5.
- 6.
- 7.

Applicants: Bachovchin
U.S.S.N. 09/289,321

8. ☒ Other - Name change in Attorney
for Applicants

8. Ivor R. Elrifi

3. ☐ The correction is not due to any error by Applicants and Applicants believe that no fee is due. However, the Commissioner is authorized to charge any additional fees that may be due, or to credit any overpayment, to Deposit Account No. 50-0311.

OR

☒ At least one of the above corrections is due to applicants' error and the fee therefor, under 37 C.F.R. 1.19(h), of \$25.00 is paid as follows:

☒ Enclosed is check for \$25.00.

☐ Charge Account _____ the sum of \$25.00.

4. Other documents:

Respectfully submitted,



Ivor R. Elrifi, Reg. No. 39,529
Heidi A. Erlacher, Technology Specialist
Attorneys for Applicants
c/o MINTZ, LEVIN
One Financial Center
Boston, Massachusetts 02111
Tel: (617) 542-6000
Fax: (617) 542-2241

Dated: November 3, 1999
TRADOCS:1252005.1(Q%1X011.DOC)



UNITED STATES POSTAL SERVICE™

POST OFFICE TO ADDRESSEE

EJ770267398US

Customer Copy

SEE REVERSE SIDE FOR
SERVICE GUARANTEE AND
INSURANCE COVERAGE LIMITS

ORIGIN (POSTAL USE ONLY)			
PO ZIP Code	Day of Delivery	Flat Rate Envelope	
Date In	Postage		
Mo. Day Year	12 Noon 3 PM		
Time In	Military	Return Receipt Fee	
AM PM	2nd Day 3rd Day	COD Fee	Insurance Fee
Weight	Int'l Alpha Country Code		
lbs. ozs.	Acceptance Clerk Initials	Total Postage & Fees	
No Delivery			
Weekend Holiday			

CUSTOMER USE ONLY

METHOD OF PAYMENT:

Express Mail Corporate Acct. No.

Federal Agency Acct. No. or
Postal Service Acct. No.

☐ **WAIVER OF SIGNATURE (Domestic Only)** Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.

☐ **NO DELIVERY**

☐ Weekend

☐ Holiday

Customer Signature

FROM: (PLEASE PRINT)

PHONE

TO: (PLEASE PRINT)

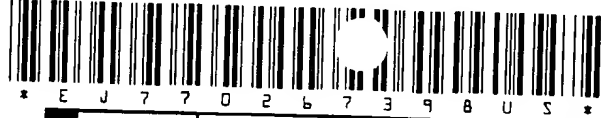
PHONE

FOR PICKUP OR TRACKING CALL 1-800-222-1811

www.usps.gov



Label 11-B July 1997





Tufts-10

Serial No. 09/289,321 File No. 19644-010 By: IRE/HAE
Title: Multivalent Compounds for Crosslinking Receptors and...
Application of Bachovchin Date: April 9, 1999

The U.S. PTO Mail Room acknowledges receipt of the following on the date stamped hereon:

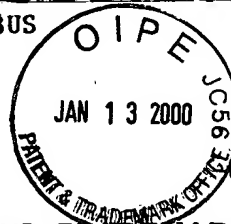
- | | |
|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <input type="checkbox"/> Req. for CPA under 37 CFR 1.53(d) | <input type="checkbox"/> Provisional Application Cover Sheet |
| <input type="checkbox"/> Change of Attorney's Address | <input type="checkbox"/> Inf. Discl. Statement, PTO Form 1449 |
| <input type="checkbox"/> New Power of Attorney | <input type="checkbox"/> References Cited |
| <input type="checkbox"/> Patent Application | <input type="checkbox"/> Copy of Notice to File Missing Parts |
| <input type="checkbox"/> Non-provisional <input type="checkbox"/> Provisional | <input type="checkbox"/> Amendment/Response |
| Incl. _____ pages, (_____ pgs) Specification, | <input type="checkbox"/> Petition for Ext. of Time (x2) |
| (_____ pgs) Abstract, (_____ pgs) Claims (_____ # claims) | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Design Patent Application | <input type="checkbox"/> Letter to Official Draftsperson |
| <input type="checkbox"/> Declaration(s) _____ | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Drawings _____ sheet(s) (FIGS. _____ - _____) | <input type="checkbox"/> Brief (x3) |
| <input type="checkbox"/> Formal <input type="checkbox"/> Informal | <input checked="" type="checkbox"/> Check for \$ <u>25.00</u> Check # <u>4744</u> |
| <input type="checkbox"/> Verified Statement claiming small entity status | <input checked="" type="checkbox"/> Transmittal Letter (x2) |
| <input type="checkbox"/> Assignment and Cover Sheet | <input type="checkbox"/> Cert. of Mailing under 37 CFR 1.8(a) |
| | <input checked="" type="checkbox"/> Express Mail Label No. <u>EJ770267398US</u> |

☒ Other Request for Corrected Filing Receipt; Copy of Filing Receipt with Corrections.

DATE MAILED November 3, 1999

Express Mail No.: EJ770267398US

MINTZ, LEVIN, COHN, FERRIS
GLOVSKY & POPEO, P.C.
INTELLECTUAL PROPERTY IMPREST ACCOUNT
1 FINANCIAL CENTER
BOSTON, MA 02111



4744

PAY
TO THE
ORDER OF

COMMISSIONER OF PATENT AND TRADEMARKS

DATE Nov. 3, 1999 5-39/110

\$ 25.00/100

Twenty Five and 00/100

DOLLARS



BankBoston, N.A. - Boston, Massachusetts

DO NOT EXCEED OVER \$10,000.00

FOR 19644-010 Corrected Filing Receipt

⑈004744⑈ ⑆011000390⑆ 545 85025⑈



ED STATES POSTAL SERVICE™

POST OFFICE TO ADDRESSEE

EJ770267398US

GIN (POSTAL USE ONLY)

IP Code	Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> Second	Flat Rate Envelope <input type="checkbox"/>
In Day Year	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Postage \$
In AM <input type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee
nt lbs. ozs.	Int'l Alpha Country Code	COD Fee Insurance Fee
elivery Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials	Total Postage & Fees \$

DELIVERY (POSTAL USE ONLY)

Delivery Attempt	Time	Employee Signature
Mo. Day	— AM — PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	— AM — PM	
Delivery Date	Time	Employee Signature
Mo. Day	— AM — PM	
Signature of Addressee or Agent		
X		
Name: Please Print		
X		

STOMER USE ONLY

OD OF PAYMENT:	<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.
s Mail Corporate Acct. No.	NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday
Agency Acct. No. or Service Acct. No.	Customer Signature

FROM: (PLEASE PRINT)

PHONE (617 , 542-6000

Ivor R. Eirifi
Mintz Levin
One Financial Center
Boston, MA 02111

19644-010 (Tufts-10) IRE/HAE

TO: PLEASE PRINT

PHONE ()

Assistant Commissioner for Patents
Office of Initial Patent Examiner
Customer Service Center
Washington, DC 20231

PRESS HARD.

You are making 3 copies.

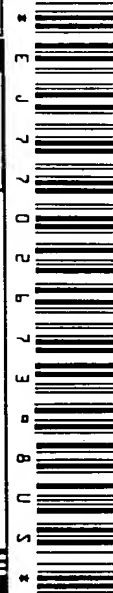
FOR PICKUP OR TRACKING CALL 1-800-222-1811

www.usps.gov



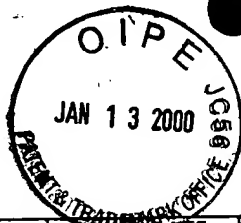
Label 11-B July 1997

Mailing Label



ERP

FILING RECEIPT



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
ASSISTANT SECRETARY AND COMMISSIONER
OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/289,321	04/09/99	1642	\$0.00	10254/7007/E	20	30	5

~~ELIZABETH R PLUMER~~
~~WOLF GREENFIELD & SACKS PC~~
~~600 ATLANTIC AVENUE~~
~~BOSTON MA 02210~~

Ivor R. Elrifi
Mintz Levin
One Financial Center
Boston, MA 02111

19644
Attorney Docket:
19644-010 (Tufts-10)

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Application Processing Division's Customer Correction Branch within 10 days of receipt. Please provide a copy of the Filing Receipt with the changes noted thereon.

Applicant(s)

WILLIAM W. BACHOVCHIN, MELROSE, MA.

CONTINUING DATA AS CLAIMED BY APPLICANT-

** THIS APPLN IS A CON OF 08/837,305 04/11/97

WHICH IS A CIP OF 08/671,756 06/28/96

** USSN: 08/837,305 is now US Patent 5,965,532

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 05/26/99

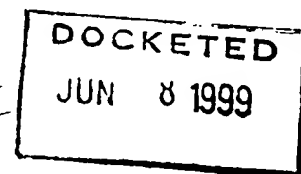
TITLE

LOW CONCENTRATIONS OF KBP2-ADIPATE INHIBITS IL-2 PRODUCTION

PRELIMINARY CLASS: 514

File Folder	<input checked="" type="checkbox"/>	Initials
ECB	<input checked="" type="checkbox"/>	
Docket Entry	<input checked="" type="checkbox"/>	
Docket Cross Off	<input checked="" type="checkbox"/>	
Order Copies	<input type="checkbox"/>	
Annuities	<input type="checkbox"/>	
Confirmation	<input type="checkbox"/>	

4.7.00
(P)



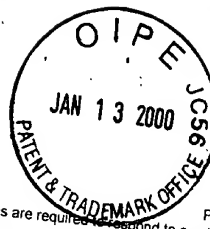
DATA ENTRY BY: BLACK, NICOLE

TEAM: 03 DATE: 05/26/99

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

Express Mail Label No. EJ
Date of Deposit: January 13, 2000

Please type a plus sign (+) in this box



01-11-00

Receipt

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.
Approved for use through 9/30/00, OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number

09/289,321

Filing Date

April 9, 1999

First Named Inventor

Bachovchin

Group Art Unit

1642

Examiner Name

Not Assigned

Attorney Docket Number

19644-010 (Tufts-10)

ENCLOSURES (check all that apply)

☐ Fee Transmittal Form

☐ Fee Attached

☐ Amendment/ Response

☐ Affidavit(s)/Declaration(s)

☐ After Final

☐ Notice of Appeal

☐ Extension of Time Request

☒ Postcard

☐ Response to Missing Parts
(Filing Date Granted)

☒ Additional Enclosure(s) (please identify below):

Second Request for Corrected Filing Receipt

Copy of Filing Receipt with Corrections

☐ Assignment Papers (for an Application)

☐ Drawing(s)

☐ Petition Routing Slip (PTO/SB/69)
and Accompanying Petition

☐ To Convert a Provisional Application

☐ Combined Declaration and
Power of Attorney

☐ Information Disclosure Statement

☐ Form 1449 PTO

☐ Small Entity Statement

☐ Request for Refund

☐ After-Allowance Communication
to Group

☐ Appeal Communication to Board
of Appeals and Interferences

☐ Appeal Communication to Group
(Brief, Reply Brief)

☐ Proprietary Information

☐ Licensing-related Papers

☐ Certified Copy of Priority
Document(s)

☐ Status Letter

☐ Terminal Disclaimer

RECEIVED
FEB 24 2000
MAIL ROOM

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Submitted by

David E. Johnson

Signature

Registration No.

41,874

Date

January 13, 2000

RECEIVED
FEB 22 2000
O I P E / J C W S

TRADOCS:1282988.1(RHYK011.DOC)

Express Mail Label No. EJ
Date of Deposit: January 13, 2000



Please type a plus sign (+) in this box



PTO/SB (12-97)

Approved for use through 9/30/00. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/289,321
	Filing Date	April 9, 1999
	First Named Inventor	Bachovchin
	Group Art Unit	1642
	Examiner Name	Not Assigned
	Attorney Docket Number	19644-010 (Tufts-10)
ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After-Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/ Response	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Appeal Communication to Group (Brief, Reply Brief)
<input type="checkbox"/> Affidavit(s)/Declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> After Final	<input type="checkbox"/> Combined Declaration and Power of Attorney	<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Notice of Appeal	<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Form 1449 PTO	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Postcard	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Response to Missing Parts (Filing Date Granted)	<input type="checkbox"/> Request for Refund	
<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):		
Second Request for Corrected Filing Receipt		Copy of 11/3/99 Request for Corrected Filing Receipt
Copy of Filing Receipt with Corrections		Copy of Revocation and New Power of Attorney

RECEIVED
FEB 24 2000
TC 1000 MAIL ROOM

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Submitted by	David E. Johnson	Registration No.	41,874
Signature			
Date	January 13, 2000		

Express Mail No. : EJ770268819US
Date of Deposit: January 13, 2000

PATENT APPLICATION
Attorney Docket No.: 19644-010 (Tufts-10)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS : Bachovchin
ASSIGNEE : Tufts University
SERIAL NUMBER : 09/289,321
FILING DATE : April 9, 1999
FOR : Multivalent Compounds for Crosslinking Receptors and Uses Thereof

EXAMINER : To Be Assigned
ART UNIT : 1642



Assistant Commissioner for Patents
Office of Initial Patent Examination
Customer Service Center
Washington, D.C. 20231

January 13, 2000
Boston, Massachusetts

RECEIVED
FEB 24 2000
10:00 MAIL ROOM

SECOND REQUEST FOR CORRECTED FILING RECEIPT

Applicant requests that a second corrected Official Filing Receipt be provided for the above-identified application. Applicant encloses a copy of the Request for Corrected Filing Receipt, submitted November 3, 1999. A request was made for correction of (1) Attorney Docket Number; (2) Attorney Name and Address; (3) Title; and (4) Continuing Data.

Only the Continuing data was amended in the Corrected Filing Receipt, which was received January 5, 2000. The Official Filing Receipt still incorrectly lists the Attorney Docket No. as "10254/7007 (E)" rather than the correct --19644-010 (TUFTS-10)--.

The Official Filing Receipt also still incorrectly lists the title as "LOW CONCENTRATIONS OF KBP2-ADIPATE INHIBITS IL-2 PRODUCTION" rather than the correct --MULTIVALENT COMPOUNDS FOR CROSSLINKING RECEPTORS AND USES THEREOF--.

Furthermore, the Official Filing Receipt also still incorrectly lists the Attorney as "Elizabeth R. Plummer" rather than --Ivor R. Elrifi--. A copy of the Revocation by Assignee and New Power of Attorney, filed 1/12/00, is attached hereto.

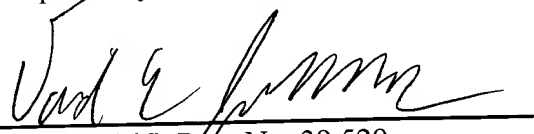
The requested corrections are indicated in red ink on the enclosed copy of the Corrected Filing Receipt.

Applicants: Bachovchin
U.S.S.N. 09/289,321

The above-listed corrections were previously requested and paid for. Applicants believe that no additional fee is due at this time. However, the Commissioner is authorized to charge any additional fees that may be due, or to credit any overpayment, to Deposit Account No. 50-0311, reference 19644-010 (Tufts-10).

Please supply a corrected Filing Receipt to the undersigned with respect to this application.

Respectfully submitted,



Ivor R. Elrifi, Reg. No. 39,529
David E. Johnson, Reg. No. 41,874
Attorneys for Applicants
c/o MINTZ, LEVIN
One Financial Center
Boston, Massachusetts 02111
Tel: (617) 542-6000
Fax: (617) 542-2241

Dated: January 13, 2000

TRADOCS:1282979.1(RHYB01!.DOC)